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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/816,634
Confirmation Number	1048
Filing Date	04/02/2004
First Named Inventor	Michael Jay Nelson
Art Unit	2661
Examiner Name	

Total Number of Pages in This Submission	5	Attorney Docket Number	34000/007
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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Supplemental Combined Declaration and Power of Attorney - 4 pages		
<table border="1"><tr><td>Remarks</td><td>Applicants submit a supplemental declaration with an original signature of Robert Allen Sherry. It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 502622 for any required fees.</td></tr></table>			Remarks	Applicants submit a supplemental declaration with an original signature of Robert Allen Sherry. It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 502622 for any required fees.
Remarks	Applicants submit a supplemental declaration with an original signature of Robert Allen Sherry. It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 502622 for any required fees.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Brett L. Borsen, Reg. 46,566
Signature	
Date	August 23, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Linda L. Leonard		
Signature		Date	August 23, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



SUPPLEMENTAL COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for a non-provisional application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

**ROTATING MEDIA CHANNELS BETWEEN RESOURCES OF AN EMERGENCY
SERVICES NETWORK AND CONFORMING EMERGENCY SYSTEMS**

SPECIFICATION IDENTIFICATION

The specification was filed on April 2, 2004 as application Serial No. 10,816,634.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.

**CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S)
UNDER 35 U.S.C. SECTION 120**

I hereby claim the benefit, under Title 35, United States Code, Section 120, of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose information that occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. SECTION 120:				
U.S. APPLICATIONS		STATUS		
U.S. APPLICATIONS	U.S. FILING DATE	Patented	Pending	Abandoned
60/552,916	03/13/2004		X	
PCT APPLICATION DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. APPLICATION NOS. ASSIGNED (IF ANY)		

POWER OF ATTORNEY

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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